FÖRM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, DC 20549

OMB APPROVAL OMB Number: 3235-0076

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FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

SEC USE ONLY

DATE RECEIVED

UNIFO	RIVI LIVITTED OFFERING EXEM	IPTION
Name of Offering (: check if this is an amendment LIMITED PARTNERSHIP INTERESTS	ent and name has changed, and indicate change.)	That I
Filing Under (Check box(es) that apply)://: Rule Type of Filing: /X /: New Filing : // Ar	504 // Rule 505 /X /: Rule 506 nendment	://Section 4(6) IF CEI/(:EULOE
	A. BASIC IDENTIFICATION DATA	12 FEB 7 8 2007 18
Enter the information requested about the issuer		
Name of Issuer (: check if this is an amendment STAGE2 CAPITAL VENTURES, L.P.	ent and name has changed, and indicate change.)	15/106 SECTION
Address of Executive Offices (Number 737 CONSTITUTION DRIVE, EXTON, PA	er and Street, City, State, Zip Code) 19341	Telephone Number (Including Area Code) 610 994 4929
Address of Principal Business Operations (Number (if different from Executive Offices)	er and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business INVESTMENT FUND.		PROCESSED
Type of Business Organization : // corporation //: business trust	/X/: limited partnership, already formed //: limited partnership, to be formed	MAR 0 1 2007 THOMSON
Actual or Estimated Date of Incorporation or Orga Jurisdiction of Incorporation or Organization: (I	Month Year O 1 Enter two-letter U.S. Postal Service Abbreviation CN for Canada; FN for other foreign jurisdiction)	FINANCIAL :/X/ Actual : Estimated :

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - · Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Each general and managing partner of partnership issuers.

Check Box(es) that Apply: //: Promoter :// Beneficial Owner :// Executive Officer :// Trustee /X/ General and/or Managing Partner

Full Name (Last name first, if individual)

STAGE2 CAPITAL VENTURES ASSOCIATES, L.P.

Business or Residence Address (Number and Street, City, State, Zip Code)

737 CONSTITUTION DRIVE

EXTON, PA 19341

Check Box(es) that Apply: // Promoter :// Beneficial Owner :// Executive Officer // Trustee / X/ General and/or Managing Partner of General Partner

Full Name (Last name first, if individual)

STAGE2 CAPITAL ASSOCIATES G.P., LLC

Business or Residence Address (Number and Street, City, State, Zip Code)

737 CONSTITUTION DRIVE

EXTON, PA 19341

Check Box(es) that Apply: // Promoter :// Beneficial Owner :// Executive Officer // Trustee / X/ General and/or Managing Partner

Full Name (Last name first, if individual)

RICHTER CAPITAL, LLC

Business or Residence Address (Number and Street, City, State, Zip Code)

737 CONSTITUTION DRIVE

EXTON, PA 19341

Check Box(es) that Apply: //: Promoter :// Beneficial Owner /X/: Executive Officer* //Trustee // General and/or Managing Partner *of the General Partner of the General Partner

Full Name (Last name first, if individual)

RICHTER, SAUL

Business or Residence Address (Number and Street, City, State, Zip Code)

737 CONSTITUTION DRIVE

EXTON, PA 19341

Check Box(es) that Apply: // Promoter :// Beneficial Owner //: Executive Officer // Trustee / X/ General and/or Managing Partner
Partner

Full Name (Last name first, if individual)

BEN FRANKLIN TECHNOLOGY PARTNERS OF SOUTHEASTERN PENNSYLVANIA

Business or Residence Address (Number and Street, City, State, Zip Code)

1835 MARKET STREET, SUITE 1100

PHILADELPHIA, PA 19103

A. BASIC IDENTIFICATION DATA - CONTINUED

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

· Each general and managing partner of partnership issuers.

Check Box(es) that Apply: // Promoter :// Beneficial Owner /X /: Executive Officer* // Trustee //: General and/or Managing Partner *of a Manager of the General Partner's General Partner

Full Name (Last name first, if individual)

ROSENTHAL, ROSEANN B.

Business or Residence Address (Number and Street, City, State, Zip Code)
1835 MARKET STREET, SUITE 1100
PHILADELPHIA, PA 19103

				В.	INFORM	ATION AB	OUT OFFER	RING				
											Yes	No
 Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?							••••••	:	: X			
. W	/hat is the	minimum in	vestment tha	t will be ac	cepted fror	n any indivi	dual?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$ <u>250,0</u>	00*
May	be reduce	d at the disc	cretion of the	e General I	Partner.							
). D	oes the off	ering permi	t joint owner	ship of a si	ngle unit?						Yes	No
co If	ommission f a person t r states, lis	or similar to to be listed in t the name of	remuneration	for solicita ed person o or dealer. 1	tion of put r agent of f more tha	chasers in c a broker or c n five (5) pe	vill be paid of onnection with dealer register rsons to be list ealer only.	th sales of sec red with the S	curities in th SEC and/or v	e offering.	X:	:
full Na	me (Last n	ame first, if	individual)									
Busine	ss or Resid	ence Addre	ss (Number a	nd Street, C	City, State,	Zip Code)					-	
Name o	of Associat	ed Broker o	r Dealer					<u> </u>				
			Has Solicite					<u>,</u>			II Chantan	
(Check [AL]	"All State [AK]	s" or check [AZ]	individual St [AR]	ates) [CA]	[CO]	[CT]	[DE]	[DC]	[FL]		II States [HI]	[ID]
IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MT)	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full N	ame (Last	name first,	if individua	l)		,		<u> </u>				
Busine	ss or Resid	lence Addre	ss (Number a	nd Street, C	City, State,	Zip Code)						
				·								
		ed Broker o				_						
States i (Check	in Which P : "All State	erson Listers" or check	d Has Solicite individual St	ed or Intend ates)	s to Solicit	Purchasers			***************************************	<u>:</u> A	Il States	
AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
E.JI N	ame (Last i	name first, i	f individual)									
run IV	cs or Pesic	lence Addre	ss (Number a	and Street, (City, State,	Zip Code)						-
	22 OI VC21C		or Dealer							-		_
Busine	of Associa	ted Broker o										
Busine Name	of Associa	erson Liste	d Has Solicite								Il States	
Busine Name	of Associa	erson Liste	d Has Solicite				[DE]	[DC]	[FL]	;:A [GA]	All States [HI]	[ID]
Busine Name States (Check	of Associa in Which F	erson Listers" or check	d Has Solicite individual S	tates)	•••••	•••••						[ID] [MO]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	OCEEDS	
1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box /X/ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregate	Amount
Type of Security	Offering Price	Already Sold
Debt	\$	s
Equity	S	\$
: Common /X/ Preferred		
Convertible Securities (including warrants)	•	S
Partnership Interests	\$ 40,000,000	\$ <u>0</u>
Other (Specify)	\$ 40,000,000	s
Total	<u> </u>	s
 Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." 	5	
	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	0	<u>\$</u>
Non-Accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Total (for things under Rule 504 only)		 -
 If this filing is an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Type of Offering 	Type of Security	Dollar Amount Sold
		2014
Rule 505		\$
Regulation A		\$
Rule 504		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees	:	\$
Printing and Engraving Costs	:X	\$ <u>10,0000</u>
Legal Fees	:X	\$ <u>200,000</u>
Accounting Fees	:X	\$_20,000
Sales Commission (specify finders' fees separately)	:	s
	:X	\$_3,000
Other Expenses (identify Bllue Sky Fees		
Total	:X	\$ <u>233,000</u>

b. Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a This difference is the "adjusted gross proceeds to the issuer."			\$39,767,000	
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C – Question 4.b above.	, e e	Payments to Officers, Directors, an Affiliates	d	ments to Others
Salaries and fees	:	\$	_ :	\$
Purchase of real estate	:	\$	_ :	\$
Purchase, rental or leasing and installation of machinery and equipment	:	\$	_ :	\$
Construction or leasing of plant buildings and facilities	:	\$	_ :	\$
Acquisition of other businesses (including the value of securities involved in this offering the may be used in exchange for the assets or securities of another issuer pursuant to a merger)	ιτ	\$		\$
Repayment of indebtedness		\$:	\$
Working capital		\$	- :	s
		•	- :X	\$ <u>39,767,000</u>
Other (specify): Investment		\$ \$	_	\$
			- · X	\$ <u></u> \$ <u>39,767,000</u>
Column Totals		\$ <u>0</u>	^ \$ <u>39,767</u>	
Total Payments Listed (column totals added)		Α	9 <u>37,797</u>	1,000
D. FEDERAL SIGNATURE				
The issuer has duly caused this notice to be signed by the undersigned duly authorized pers following signature constitutes an undertaking by the issuer to furnish to the U.S. Securitie request of its staff, the information furnished by the issuer to any non-accredited investor p	s and b	≝xchange Co	ommissioi	n, upon written
Issuer (Print or Type) Signature	,		Date	ARY j5, 2007
STAGE2 CAPITAL VENTURES, L.P.			FEDRU	AR1 [5, 2007
Name of Signer (Print or Type) Title of Signer (Print or Type)				
SAUL RICHTER PRESIDENT OF THE GENERAL F PARTNER	ART	NER OF TH	IE GENE	ERAL
ATTENTION				
Intentional misstatements or omissions of fact constitute federal criminal	violati	ons. (See 1	8 U.S.C.	1001.)

